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First Inventor	CHUI	:07
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		19. C	ORRESPO	NDENCE A	ADDRESS.	•		
	X	Customer Number:	3040	2 		or L Com	espondence address below	
	Name	William J Stoffel						<u> </u>
	Address	1735 Market St - Ste A PMB 455						_
	City	Philadelphia	State	PA		Zip Code	19103	
	Country		Telephone	215-670-14	455	Fax	267-200-0730	

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Patent fees are subj	ect to annual revision.	First Named Inventor Chui et al. Examiner Name		
Applicant claims small entity status.	See 37 CFR 1.27	Art Unit		
	(\$) \$1,080.00	Attorney Docket No. CS03-050		
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SUBMITTED BY	ILLIAM J STOFFEL	Registration No. (Attorney/Agent)	39,390 Telephone Date	1/21/04
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215-670-2455

Subject:

Serial No.

DOCKET: CS03-050 Inventor: CHUI et al.

Title: STRUCTURE AND METHOD TO FORM SOURCE AND DRAIN REGIONS OVER DEPLETION DOPED REGIONS

Group Art Unit: Examiner:

15 CERTIFICATE OF MAILING BY EXPRESS MAIL UNDER R 37 CFR 1.10

I hereby certify that the following correspondence:

patent application comprising: Patent application transmission sheet, Fee transmittal form, credit card form, declaration signed & POA, specification, FIGS, IDS and non-patent references, assignment cover sheet, assignment papers

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